

NEW YORK WING STAFF APPLICATION

Can be entered online - <http://encampment.nywgcadets.org/>

ACTIVITY INFORMATION

Name of Activity	Location	Start and End Date
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CAP UNIT INFORMATION

Charter #	Squadron Name	Group Name
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APPLICANT INFORMATION

Name of Applicant (Last, First, MI)	Date Joined CAP mmyy	Gender	CAP Grade	Age	CAPID
Street Address		City			State
Zip	E-mail Address			Web Page Address	
Home Phone	Business Phone	Pager	Cell Phone	Other (Specify)	

I. LIST PREVIOUS ENCAMPMENTS ATTENDED

Year	Encampment	Position Held	Awards

II. LIST OTHER LEADERSHIP TRAINING (i.e., Leadership Schools, COS, ROTC, clubs, sports, jobs, etc.)

Year	Activity	Position Held	Awards

III. POSITION APPLYING FOR (Rank Order 1, 2 and 3 – Only 3 Choices)

COMMAND	EXECUTIVE	FLIGHT	STAN/EVAL (SET)
<input type="checkbox"/> Commander	<input type="checkbox"/> Finance	<input type="checkbox"/> Group First Sergeant+	<input type="checkbox"/> SET
<input type="checkbox"/> Deputy Commander	<input type="checkbox"/> Logistics	<input type="checkbox"/> Squadron Commander+	OTHER (List) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Commandant of Cadets*	<input type="checkbox"/> Food Operations+	<input type="checkbox"/> Squadron First Sergeant+	
<input type="checkbox"/> Executive Officer	<input type="checkbox"/> Public Affairs	<input type="checkbox"/> Flight Commander	
<input type="checkbox"/> Liaison Officer*	<input type="checkbox"/> Training	<input type="checkbox"/> Flight Sergeant	
<input type="checkbox"/> Safety*	<input type="checkbox"/> Medical	<input type="checkbox"/> Senior Flight Mentor*	
<input type="checkbox"/> Chaplain*	<input type="checkbox"/> Air Operations+	<input type="checkbox"/> Flight Mentor*	
<input type="checkbox"/> MLO*	<input type="checkbox"/> Administration	<input type="checkbox"/> Flight Academy Staff	
<i>*Senior Member Position Only</i>	<input type="checkbox"/> Senior Support Staff*	<i>+Position may not be needed</i>	

IV. WORKSHOP ATTENDANCE

Will you be attending the Leadership Workshop?	Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>
Will you be attending the Staff Skills Workshop?	Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/>

I wish to apply for the Staff Positions indicated above. However, I will perform any duty assigned to me. ☐ Yes ☐ No
 (Cadets Only) I have attached a typed one-page essay outlining relevant CAP experiences and skills explaining why I feel I could do a good job in the positions.

 Signature of Applicant

 Date

I certify that the applicant is a member in good standing in my unit and I approve his/her request.

 Signature of Unit Commander

 Date